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**\*\* CONTINUING DATA \*\*\*\*\***  
 NONE

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 NONE

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
 \*\* 10/29/2003

Foreign Priority, claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no C.B.	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no C.B. <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 5
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Verified and Acknowledged  
 Examiner's Signature: *Corbett* Initials: *C.B.*

**ADDRESS**  
 32615

**TITLE**  
 Method and system for providing a circle of trust on a network

<b>FILING FEE RECEIVED</b> 1134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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